## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

FILED Jun 26, 2006 08:00 AN Secretary of State

DOCUMENT # L02000022617

1. Entity Name

NARCOOSSEE ACQUISITIONS, LLC



Principal Place of Business

130 S. ORANGE AVENUE

SUITE 300 ORLANDO, FL 32801 Mailing Address

130 S. ORANGE AVENUE

SUITE 300

ORLANDO, FL 32801



06052006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 11-3873110 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

YEAGER, ROBERT A 130 S. ORANGE AVENUE SUITE 300 ORLANDO, FL 32801

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|  |   |                     |  | •  |
|--|---|---------------------|--|--|
| 8. The above the obligat   | named entity submits this statement for the purpose of char<br>tions of registered agent. | nging its registere | d office or registered agent, or both, in the  | e State of Florida. I am familiar with, and accept |
| SIGNATURE.   | Signature, typed or printed name of registered agent and title if applicable              |                     |  |  |
| ouguecute, typou or prairies a registered agont and fille if applicable (NOTE Registered |   |                     | Agent alignature required when reinstating)  | DATE   |
| Fil<br>Due i   | iing Fee is \$50.00<br>by September 6, 2006   |                     |  |  |
| 9.   | MANAGING MEMBERS/MANAGERS   |                     | , , ,  |  |
| TITLE  | MGR   |                     |  |  |
| NAME   | YEAGER, ROBERT A  |                     |  |  |
| STREET ADDRESS   | 130 S. ORANGE AVENUE, SUITE 300   |                     | U00000567569   |  |
| CITY-ST-ZIP  | ORLANDO, FL 32801   |                     | រាជ  | /26/06-80001-012 SS.00                             |
| TITLE  |   |                     | fact for   | ಗಳಾಗಿ ಕಾರ್ಯ ಬಾಬಬಬಬಹು ಅತ್ಯಮ ಬೆಬೆಕಬೆಟೆ               |
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| CITY-ST-ZIP  |   |                     |  |  |

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and apprate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited flability company or the received or indicated on the received or indicated on this report is true and appropriate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited flability company or the received or indicated on the same legal effect as if made under oath; that I am a managing member or manager of the limited flability company or the received or indicated on the same legal effect as if made under oath; that I am a managing member or manager of the limited flability company or the received or indicated on this report is true and appropriate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited flability company or the received or indicated on this report is true.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

/21/06

407.425.6623

Daytime Phone #